Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 1 of 60

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licen Bring iden	e the name that is on government-issued ure identification (for nple, your driver's use or passport). g your picture tification to your ting with the trustee.	Andrea First name S. Middle name Hudson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	used Inclu	other names you have d in the last 8 years ade your married or den names.	FKA Andrea Walston	
3.	you num Indi	the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-2018	

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 2 of 60

Case number (if known)

Debtor 1 Andrea S. Hudson

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 3235 Citadel Drive Rockford, IL 61109 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Winnebago County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Document Page 3 of 60 Desc Main

Case number (if known) Debtor 1 Andrea S. Hudson

Par	Tell the Court About	our B	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	Chapter 7							
		□с	hapter 11						
		□с	hapter 12						
		□с	hapter 13						
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	pically, if you are paying the fee you	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money If, your attorney may pay with a credit card or check with			
				the fee in ins e in Installment	n, sign and attach the Application for Individuals to Pay				
						only if you are filing for Chapter 7. By law, a judge may,			
						r income is less than 150% of the official poverty line tha installments). If you choose this option, you must fill out			
			the Application	on to Have the 0	Chapter 7 Filing Fee Waived (Offici	al Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No	Э.						
	last 8 years?	□Y€	es.						
			District		When	Case number			
			District		When	Case number			
			District	-	When	Case number			
10.	Are any bankruptcy	■ No)						
	cases pending or being filed by a spouse who is	□ Ye	es.						
	not filing this case with you, or by a business								
	partner, or by an affiliate?								
	annate:		Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	□ No	o. Go to I	ne 12.					
	residence?	■ Ye	es Has yo	ur landlord obta	ained an eviction judgment against	you and do you want to stay in your residence?			
				No. Go to line	12.				
			_			udgment Against You (Form 101A) and file it with this			
				bankruptcy pe		udginent Against Tou (Form 101A) and the it with this			

Document Page 4 of 60 Case number (if known) Debtor 1 Andrea S. Hudson Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 5 of 60

Debtor 1 Andrea S. Hudson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 6 of 60 Case number (if known)

Der	Alidiea S. Hudson	•							
Par	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.						
		16b.	Yes. Go to line 17.	nucinase dahte? Pusinase dahte ara dahte	a that you incurred to obtain				
		100.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt pro vailable to distribute to unsecured creditors					
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	☐ 50-99)	☐ 5001-10,000	5 0,001-100,000				
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000				
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?			☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
	be worth.		•	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	•	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	_							
		_ `		□ \$100,000,001 - \$100 million	☐ More than \$50 billion				
Par	: 7: Sign Below								
For	you	I have ex	camined this petition, and I de	eclare under penalty of perjury that the infor	rmation provided is true and correct.				
					□ 25,001-50,000 □ 50,001-100,000 □ More than100,000 □ \$500,000,001 - \$1 billion □ \$10,000,000,001 - \$50 billion □ \$10,000,000,001 - \$50 billion □ \$10,000,000,001 - \$10 billion □ \$10,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion □ More than \$50 billion □ mattorney to help me fill out this pecified in this petition. If or property by fraud in connection with a givears, or both. 18 U.S.C. §§ 152, 1341, 1519,				
			1,000-5,000						
		I request	relief in accordance with the	chapter of title 11, United States Code, spe	ecified in this petition.				
		bankrupt and 357	tcy case can result in fines up 1.	t, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20					
			rea S. Hudson S. Hudson	Signature of Debte	or 2				
			e of Debtor 1	-					
		Executed		Executed on					
			MM / DD / YYYY	M	M / DD / YYYY				

Debtor 1 Andrea S. Hudson Page 7 of 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel A	A. Springer	Date	June 16, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Daniel A. S	Springer			
Printed name				
Springer L	aw Firm			
Firm name				
2222 E Sta	te St			
Suite 107				
Rockford, I	IL 61104			
Number, Street, 0	City, State & ZIP Code			
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com	
6314059				
Bar number & Sta	ate			

		DOGUIII	eni Paue o ul ou	
Fill in this infor	mation to identify your	case:		
Debtor 1	Andrea S. Hudso	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	59,220.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	50,917.20
	1c. Copy line 63, Total of all property on Schedule A/B	\$	110,137.20
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	131,355.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	111,076.00
	Your total liabilities	\$	242,431.00
Par	t 3: Summarize Your Income and Expenses		
l.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,011.2
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,573.09
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	personal	, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Entered 06/16/17 14:05:40 Desc Main Filed 06/16/17 Case 17-81453 Doc 1 Document

Page 9 of 60 Case number (if known) Debtor 1 Andrea S. Hudson

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	1

4,441.03

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Case 17-8145	3 Doc 1		06/16/17 ument	Entered 06/16/17 Page 10 of 60	7 14:05:40	Desc	Main
Fill	in this in	formation to identif	y your case and th			1 800 10 01 00			
Deb	otor 1	Andrea S. F		e Name		Last Name			
	otor 2 ouse, if filing)	First Name	Middle	e Name		Last Name			
Uni	ted States	Bankruptcy Court fo	r the: NORTHER	RN DISTE	RICT OF ILLIN	NOIS			
Cas	se numbe	r				-			Check if this is an amended filing
_		Form 106A/E	_						
Sc	ched	ule A/B: P	roperty						12/15
nfor Ansv	mation. If wer every o	more space is needed question.	attach a separate s	heet to th	is form. On the	e are filing together, both are e e top of any additional pages, on or Have an Interest In			
D	o vou own	or have any legal or e	quitable interest in a	anv reside	ence building	land, or similar property?			
_	_	, ,	quitable interest in t	arry reside	once, banany,	iana, or similar property:			
	No. Go to								
1.1	• Yes. vvn	ere is the property?		What	is the property	? Check all that apply			
	1202 C	erasus Drive			Single-family h		Do not deduct sec	ured claims	s or exemptions. Put
	Street add	ress, if available, or other de	scription		Duplex or mult		the amount of any	secured cla	sims on Schedule D: Secured by Property.
	Rockfo	ord IL	61108-0000		Manufactured Land	or mobile home	Current value of tentire property?		Current value of the cortion you own?
	City	State	ZIP Code		Investment pro	pperty	\$118,440	0.00	\$59,220.00
					Other				ownership interest by by the entireties, or
						in the property? Check one	a life estate), if kr	,	y by the chancato, c.
	\ A /:	h		_	Debtor 1 only				
	Winne	bago			Debtor 2 only				
	County				Debtor 1 and I	·			nity property
				Other		the debtors and another	(see instructions	s)	
					rty identification	ou wish to add about this item on number:	, such as local		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$59,220.00

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 11 of 60

Case number (if known) Debtor 1 Andrea S. Hudson 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes **Ford** Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Explorer** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2013 Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$13,500.00 \$6,750.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: **Impala** Model: ■ Debtor 1 only Creditors Who Have Claims Secured by Property. 2006 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$3,375.00 \$3,375.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Ford Who has an interest in the property? Check one 3.3 Make: the amount of any secured claims on Schedule D: **Fusion** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only Year: 2012 Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information At least one of the debtors and another \$7,300.00 \$3,650.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$13,775.00 pages you have attached for Part 2. Write that number here.....= Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... \$235.00 Household Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No

Official Form 106A/B
Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Debtor 1	Andrea S. H	Document Page 12 of 60 **Case number (if known)	
Yes.	Describe		
. 55.	200000	TV, Computer, Cellphone	\$225.00
		TV, Computer, Cempnone	Ψ223.00
Examp □ No		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, c tions, memorabilia, collectibles	or baseball card collections;
		Books, Pictures, Home Decor	\$65.00
Examp ■ No	musical inst	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ar	nd kayaks; carpentry tools;
Firear Exam ■ No		es, shotguns, ammunition, and related equipment	
□ No		elothes, furs, leather coats, designer wear, shoes, accessories	
		Used Clothing	\$1,200.00
□ No	Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go	
		Costume Jewelry	\$330.00
Exam No □ Yes. 4. Any of □ No	arm animals uples: Dogs, cats Describe ther personal and Give specific in	nd household items you did not already list, including any health aids you did not list	
		of all of your entries from Part 3, including any entries for pages you have attached number here	\$2,055.00
art 4: De	escribe Your Fina	ncial Assets	
o you o	wn or have any	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	1
	m 106A/B	Schedule A/B: Property	page 3
	100,40	Contractor 7 (D. 1 Toporty	Pago

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 13 of 60 Case number (if known) Debtor 1 Andrea S. Hudson 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **PNC Bank** \$31.20 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **Edward Jones** \$31,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: Yes. Rent Current landlord, Northshore Holdings LTD. \$3,500.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

		Case	17-81453	Doc 1	Filed 06/16/17 Document	Entered 06/10 Page 14 of 60	6/17 14:05:40	Desc Main
De	btor 1	Andrea	S. Hudson		Document	- Age 14 01 00	ase number (if known)	
	<i>Exam</i> ■ No	<i>ples:</i> Buildir	ises, and other ng permits, exclusific information a	usive license	s, cooperative association	n holdings, liquor licens	es, professional licens	es
М	oney or	property o	owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	funds owe	-	bout them, ir	ncluding whether you alre	eady filed the returns an	d the tax years	
	Exam □ No -		due or lump sum		ousal support, child suppo	ort, maintenance, divord	ce settlement, property	settlement
				Bac	ck Child Support		Child Support	\$556.00
	Exam □ No -	<i>ples:</i> Health	insurance comp		health savings account (HSA); credit, homeown Beneficiar		nce Surrender or refund value:
			Ter	m Life thro	ough current employe	er Minor ch	ildren	\$0.00
33. 34.	If you some some No Yes. Claim: Exam No Yes. Other No	are the berone has die Give spectors against the ples: Accide Describe econtingent	neficiary of a livind. diffic information hird parties, whents, employme	ng trust, expendent or not not disputes, in ted claims o	m someone who has die ect proceeds from a life in t you have filed a lawsu nsurance claims, or rights of every nature, includin	isurance policy, or are continued in the state of the sta	or payment	
	■ No		sets you did no		t			
	. Add	the dollar	value of all of y	our entries t	from Part 4, including a			\$35,087.20

		Case 17-81453	Doc 1	Filed 06/16/17 Document	Entered 0 Page 15 of	6/16/17 14:05:40 60	Desc Main	
Debt	or 1	Andrea S. Hudson				Case number (if known)		
Part 5	5: Des	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real esta	ate in Part 1.		
37. D e	o you o	own or have any legal or equi	itable interest	in any business-related p	roperty?			
	No. Go	to Part 6.						
	Yes. G	So to line 38.						
Part (scribe Any Farm- and Commo ou own or have an interest in fa			n or Have an Interes	st In.		
46. D	o you	own or have any legal or	r equitable in	nterest in any farm- or	commercial fishir	ng-related property?		
ı	No.	Go to Part 7.						
I	☐ Yes.	. Go to line 47.						
Part 7	7.	Describe All Property You	Own or Hove	on Interest in That You Di	d Not List Above			
rait	<i>'</i> .	Describe All Property Tou	Own or nave a	in interest in That You Di	I NOT LIST ADOVE			
		have other property of a bles: Season tickets, country						
	No							
	Yes.	Give specific information						
54.	Add t	he dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here		\$0.0	0
Part 8	8:	List the Totals of Each Part	of this Form					
55.	Part 1	: Total real estate, line 2					\$59,220	0.00
56.	Part 2	2: Total vehicles, line 5			\$13,775.00			
57.	Part 3	3: Total personal and hou	sehold items	s, line 15	\$2,055.00			
58.	Part 4	l: Total financial assets, li	ine 36		\$35,087.20			
59.	Part 5	i: Total business-related	property, line	e 45	\$0.00			
60.	Part 6	6: Total farm- and fishing-	related prop	erty, line 52	\$0.00			
61.	Part 7	7: Total other property no	t listed, line	54 +	\$0.00			
62.	Total	personal property. Add lin	nes 56 throug	h 61	\$50,917.20	Copy personal property to	otal \$50,91	7.20
63.	Total	of all property on Schedu	ıle A/B. Add	line 55 + line 62			\$110,137.2	0

Official Form 106A/B Schedule A/B: Property page 6

			$\mathbf{n} = \mathbf{r} \mathbf{a} \mathbf{u} \mathbf{c} \cdot \mathbf{r} 0 0 0 0$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Andrea S. Hudso	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the /	Property	You	Claim	as	Exempt
---------	----------	-------	-----------------	-----	-------	----	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2013 Ford Explorer Line from Schedule A/B: 3.1	\$6,750.00		\$2,400.00	735 ILCS 5/12-1001(c)
Life Hoth Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
2013 Ford Explorer Line from Schedule A/B: 3.1	\$6,750.00		\$249.00	735 ILCS 5/12-1001(b)
Line nom schedule A.B. 5.1			100% of fair market value, up to any applicable statutory limit	
Household Furniture	\$235.00		\$235.00	735 ILCS 5/12-1001(b)
Elle Holli Genedale A.B. G.1			100% of fair market value, up to any applicable statutory limit	
TV, Computer, Cellphone Line from Schedule A/B: 7.1	\$225.00		\$225.00	735 ILCS 5/12-1001(b)
Life Hoth Schedule A/B. 1-1			100% of fair market value, up to any applicable statutory limit	
Books, Pictures, Home Decor	\$65.00		\$65.00	735 ILCS 5/12-1001(b)
Line nom soliedule A/D. 9.1			100% of fair market value, up to any applicable statutory limit	

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 17 of 60

Case number (if known)

De	Allulea S. Huusoii					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B				
	Used Clothing Line from Schedule A/B: 11.1	\$1,200.00		\$1,200.00	735 ILCS 5/12-1001(a)	
L	Elle Holli Golloddie 772. TTT			100% of fair market value, up to any applicable statutory limit		
	Costume Jewelry Line from Schedule A/B: 12.1	\$330.00		\$330.00	735 ILCS 5/12-1001(b)	
L	Line Ironi Scriedule Arb. 12.1			100% of fair market value, up to any applicable statutory limit		
	Checking: PNC Bank Line from Schedule A/B: 17.1	\$31.20		\$31.20	735 ILCS 5/12-1001(b)	
L	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	401(k): Edward Jones Line from Schedule A/B: 21.1	\$31,000.00		100%	735 ILCS 5/12-1006	
	Line Holli Golledale PAB. 2111			100% of fair market value, up to any applicable statutory limit		
	Child Support: Back Child Support Line from Schedule A/B: 29.1	\$556.00		100%	735 ILCS 5/12-1001(g)(4)	
	Line Holli Schedule AVB. 23.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			ed on or after the date of adjustmer	ıt.)	
	No					
	Yes. Did you acquire the property cover	ea by the exemption wi	itnin 1	215 days before you filed this case	!	
	□ NO □ Vos					

		Document	Page 1	.8 of 60		
Fill in this informat	tion to identify you	r case:				
Debtor 1	Andrea S. Huds	on				
_	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United Ctates Deals		NODTHEDN DISTRICT OF HIL	INOIC			
United States Bankr	ruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case number						
(if known)						if this is an
					amend	led filing
Official Form	106D					
		Who Have Claims	Socure	nd by Droporty	\ 7	40/45
Scriedule D	. Creditors	Who Have Claims	Secure	ed by Propert	у	12/15
is needed, copy the A		f two married people are filing togethout, number the entries, and attach it t				
number (if known). 1. Do any creditors ha	wo claims socured by	vour proporty?				
<u> </u>	_		a a b a duil a a	Vari hava nathing also t	a ranget an this form	
_		nis form to the court with your other	schedules.	You have nothing else to	o report on this form.	
Yes. Fill in al	Il of the information b	pelow.				
Part 1: List All S	Secured Claims					
		nore than one secured claim, list the cree			Column B	Column C
		a particular claim, list the other creditors cal order according to the creditor's name		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	•	, and the second		value of collateral.	claim	if any
2.1 Ford Motor Creditor's Name	Credit	Describe the property that secures t	he claim:	\$14,417.00	\$7,300.00	\$7,117.00
Creditor's Name		2012 Ford Fusion				
PO Box 542	000	As of the date you file, the claim is: apply.	Check all that			
Omaha, NE	68154	Contingent				
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as r	nortgage or s	secured		
Debtor 2 only		car loan)				
Debtor 1 and Debto		☐ Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clain community debt	n relates to a	☐ Other (including a right to offset)				
Date debt was incurre	ed 1/1/2015	Last 4 digits of account numb	oer			
2.2 Ford Motor	Credit	Describe the property that secures t	he claim:	\$8,202.00	\$13,500.00	\$0.00
Creditor's Name		2013 Ford Explorer				
		-				
505 540		As of the date you file, the claim is:	Check all that			
PO Box 542		apply.				
Omaha, NE		Contingent				
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as r	mortgage or s	secured		
Debtor 2 only		car loan)				
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit				
Check if this clain community debt	n relates to a	☐ Other (including a right to offset)				
Johnnannty Gebt						
Date debt was incurre	ed 10/6/2012	Last 4 digits of account numb	oer			

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 19 of 60

Debtor 1 Andrea S.	Hudson		Case	number (if know)		
First Name	Middle Na	ame Last Name				
2.3 OneMain		Describe the property that secures the claim:		\$9,245.00	\$3,375.00	\$5,870.00
Creditor's Name		2006 Chevrolet Impala		40,210100	40,070.00	ψο,οι σισσ
		As of the date you file, the claim is: Check all th				
PO Box 1010	47700	apply.	a.			
Evansville, IN		Contingent				
Number, Street, City, St	tate & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? C	neck one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mortgage of	or secured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lie	en)			
☐ At least one of the debt	•	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim re		☐ Other (including a right to offset)				
community debt		, ,				
Date debt was incurred		Last 4 digits of account number				
Wells Fargo Ho	ome			¢00 404 00	¢449.440.00	¢0.00
Mortgage Creditor's Name		Describe the property that secures the claim:		\$99,491.00	\$118,440.00	\$0.00
Creditor's Name		1202 Cerasus Drive Rockford, IL 61108 Winnebago County				
Attn: Bankrupt	cv Dent					
PO Box 10335	oy Dept.	As of the date you file, the claim is: Check all th	at			
Des Moines, IA	50306	apply. □ Contingent				
Number, Street, City, St	tate & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Cl	neck one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortgage	or secured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	=	Statutory lien (such as tax lien, mechanic's lie	en)			
At least one of the deb	tors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)				
Date debt was incurred	3/29/2012	Last 4 digits of account number				
	•	olumn A on this page. Write that number here:		\$131,355.0	0	
If this is the last page of Write that number here		the dollar value totals from all pages.		\$131,355.0	0	
				<u> </u>		
Part 2: List Others to	Be Notified fo	r a Debt That You Already Listed				
trying to collect from you	I for a debt you or of the debts that	e notified about your bankruptcy for a debt tha we to someone else, list the creditor in Part 1, a you listed in Part 1, list the additional creditors is page.	and then lis	st the collection agend	y here. Similarly, if yo	u have more
Name, Number, Sti			n which line	in Part 1 did you enter	the creditor? 2.4	
1771 West Die Naperville, IL	hl Road, Suite	450	ast 4 digits o	of account number		
Name, Number, Sti	-		n which line	in Part 1 did you enter	the creditor? 2.4	
Winnebago Co		Court		·		
400 W State S 2017 CH 452	L	La	ast 4 digits o	of account number		
Rockford, IL 6	1101					

		Document	Page 20 of 60	
Fill in th	is information to identify yo	ur case:		
Debtor 1	Andrea S. Hud	son		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,		Middle Name	Last Name	
	0,	NODTHERN DICTRICT OF H		
United S	tates Bankruptcy Court for the	e: NORTHERN DISTRICT OF IL	LLINOIS	
Case nu	mber			
(if known)				Check if this is an
				amended filing
Officia	I Form 106E/F			
Sched	dule E/F: Creditors	Who Have Unsecured	l Claims	12/15
Schedule Schedule left. Attac	G: Executory Contracts and Uno D: Creditors Who Have Claims S h the Continuation Page to this case number (if known).	expired Leases (Official Form 106G). Secured by Property. If more space is page. If you have no information to re	list executory contracts on Schedule A/B: Pr Do not include any creditors with partially se needed, copy the Part you need, fill it out, no eport in a Part, do not file that Part. On the top	ecured claims that are listed in umber the entries in the boxes on the
Part 1:	List All of Your PRIORITY			
_	ny creditors have priority unsec	ured claims against you?		
_	o. Go to Part 2.			
Dort 2:	<u> </u>	DITY Unaccured Claims		
Part 2:	List All of Your NONPRIO			
_	ny creditors have nonpriority un			
		is part. Submit this form to the court with	n your other schedules.	
Y	es.			
unse	cured claim, list the creditor separa one creditor holds a particular clair	ately for each claim. For each claim liste	he creditor who holds each claim. If a creditor d, identify what type of claim it is. Do not list clain have more than three nonpriority unsecured cla	ms already included in Part 1. If more
				Total claim
	Capital One Bank USA N	A Last 4 digits of ac	count number	\$465.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the deb	ot incurred?	
	PO Box 30281			
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply	
	Who incurred the debt? Check o	•	The, and claim is: Onlook all that apply	
1	Debtor 1 only	☐ Contingent		
1	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and	another Type of NONPRIO	RITY unsecured claim:	
	☐ Check if this claim is for a co			
	debt s the claim subject to offset?	Obligations arisi report as priority cla	ing out of a separation agreement or divorce that	t you did not
	No	<u>-</u> ' ' '	n or profit-sharing plans, and other similar debts	
	■ No □ Yes	·	Credit Card Purchases	
	_ 163	Other. Specify	Ordan Gara i dicilases	

Document Page 21 of 60 Debtor 1 Andrea S. Hudson Case number (if know) 4.2 CEPAmerica Illinois LLP Last 4 digits of account number \$126.00 Nonpriority Creditor's Name PO Box 582663 When was the debt incurred? Modesto, CA 95358-0046 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utilities ☐ Yes 4.3 Citimortgage Last 4 digits of account number \$77,892.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 6243 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Mortgage Deficiency ☐ Yes 4.4 **Comenity Bank** Last 4 digits of account number \$2,633.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 22 of 60

Debtor 1 Andrea S. Hudson Case number (if know) 4.5 Comenity Bank Last 4 digits of account number \$94.00 Nonpriority Creditor's Name PO Box 182120 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.6 **Comenity Bank/Bergners** \$1,215.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 182789 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card Purchases** Other. Specify 4.7 **Comenity Bank/Victorias Secret** Last 4 digits of account number \$1,438.00 Nonpriority Creditor's Name PO Box 182789 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes

Document Page 23 of 60 Debtor 1 Andrea S. Hudson Case number (if know) 4.8 Credit First Natl Assoc Last 4 digits of account number \$411.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 81315 Cleveland, OH 44181-0315 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.9 **Crusader Clinic** Last 4 digits of account number \$157.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 1100 Broadway Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.1 Exxon/Mobil/CBNA \$729.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 6497 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Page 24 of 60 Document Case number (if know) Debtor 1 Andrea S. Hudson 4.1 Federal Loan Servicing Credit \$5,782.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 60610 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Student Loans ☐ Yes 4.1 **MACYS** \$606.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 8218 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes

Maurice Hilton	Last 4 digits of account number
Nonpriority Creditor's Name 3039 16th Street Rockford, IL 61109	When was the debt incurred?
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply
■ Debtor 1 only	☐ Contingent
☐ Debtor 2 only	☐ Unliquidated
☐ Debtor 1 and Debtor 2 only	☐ Disputed
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
☐ Check if this claim is for a community	☐ Student loans
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
■ No	\square Debts to pension or profit-sharing plans, and other similar debts
☐ Yes	Other. Specify Personal Loan

4.1 3

\$2,751.00

Entered 06/16/17 14:05:40 Case 17-81453 Doc 1 Filed 06/16/17 Desc Main

Document Page 25 of 60 Case number (if know) Debtor 1 Andrea S. Hudson 4.1 Mercy Health System \$570.00 Last 4 digits of account number Nonpriority Creditor's Name 1000 Mineral Point Avenue When was the debt incurred? Janesville, WI 53548 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.1 **OSF St. Anthony Med Center** \$272.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 5510 East State St. Rockford, IL 61108-2381 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Pav Pal Credit/Bill Me Later \$1.800.00 6 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5138 When was the debt incurred? **Lutherville Timonium, MD 21094** Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Debt Owed ☐ Yes

Page 26 of 60 Case number (if know) Document Debtor 1 Andrea S. Hudson

4.1 7	Rockford Pediatric Pulmonology	Last 4 digits of account number	\$283.00
	Nonpriority Creditor's Name 7144 Kleckner Road Rockford, IL 61107	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.1	Sears/CBNA	Last 4 digits of account number	\$669.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 6282	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.1 9	Sprint	Last 4 digits of account number	\$2,381.00
	Nonpriority Creditor's Name KSOPHT0101-Z4300	When was the debt incurred?	
	6391 Sprint Parkway Overland Park, KS 66251 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	□ o continuos t	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utilities	

Debto	Andrea S. Hudson	Document Page 27 of 60 Case number (if know)	
4.2	Suntrust	Last 4 digits of account number	\$3,253.00
	Nonpriority Creditor's Name 1797 NE Executive Park Lane Atlanta, GA 30329	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.2	SYNCB/JC Penney	Last 4 digits of account number	\$296.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965007	When was the debt incurred?	
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card Purchases	
4.2	SYNCB/Old Navy DC	Last 4 digits of account number	\$1,016.00
	Nonpriority Creditor's Name PO BOX 965005	When was the debt incurred?	
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Credit Card Purchases

Entered 06/16/17 14:05:40 Case 17-81453 Doc 1 Filed 06/16/17 Desc Main

Page 28 of 60 Document Case number (if know) Debtor 1 Andrea S. Hudson 4.2 Syncb/Sams Club \$1,105.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 965005 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Purchases ☐ Yes 4.2 SYNCB/Wal-Mart \$696.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 965024 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.2 T-Mobile Bankruptcy Team \$3,782,00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 53410 When was the debt incurred? Bellevue, WA 98015-3410 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes

	Case 17-81453 Doc 1	Document Page 29 of 60	lain
Debto	Andrea S. Hudson	Case number (if know)	
4.2 6	TD Bank USA/Target Credit	Last 4 digits of account number	\$154.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.2	The Room Place	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 7340 E State St, Rockford Rockford, IL 61108	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Debt Owed	
4.2	US Cellular	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name		
	Attn: Bankruptcy Dept. 8410 W. Bryn Mawr Chicago, IL 60631	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

■ Other. Specify Debt Owed

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

 $\hfill\Box$ Check if this claim is for a community

Is the claim subject to offset?

Debtor 1 Andrea S. Hudson Page 30 of 60 Case number (if know)

have more than one creditor for any of the debts to notified for any debts in Parts 1 or 2, do not fill out	that you listed in Parts 1 or 2, list the a	additional creditors here. If you do not have additional persons to be
Name and Address Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Bloomington, IL 01702-3037	Last 4 digits of account number	
Name and Address Amsher Collection Services 4524 Southlake Parkway 15 Birmingham, AL 35244	On which entry in Part 1 or Part 2 did Line 4.25 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101	Last 4 digits of account number On which entry in Part 1 or Part 2 did Line 4.14 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101	On which entry in Part 1 or Part 2 did Line 4.17 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241	On which entry in Part 1 or Part 2 did Line 4.19 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address GreenSky PO Box 29429 Atlanta, GA 30329	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.9 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Stanislaus Credit Control Services, 914 14th Street P.O. Box 480 Modesto, CA 95353	On which entry in Part 1 or Part 2 did Line 4.2 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type of		
Total the amounts of certain types of unsecured of type of unsecured claim.	claims. This information is for statistic	al reporting purposes only. 28 U.S.C. §159. Add the amounts for each
6a. Domestic support obligation	ons	Total Claim 6a. \$ 0.00

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Page 31 of 60 Case number (if know) Document

Debtor 1 Andrea S. Hudson

Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
HOIII I alt 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 111,076.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 111,076.00

			III FAU C 32 ULUU	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Andrea S. Hudso	n		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3			Oldio	2.11 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5	·				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

		Documer	rt Page 33 of 60	
Fill in th	nis information to identify your	case:		
Debtor 1	1 Andrea S. Hudso	n		
Dobtoi	First Name	Middle Name	Last Name	-
Debtor 2	2			
(Spouse if,	, filing) First Name	Middle Name	Last Name	-
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS	_
O				
Case nu (if known)	umber			☐ Check if this is an
				amended filing
Oπ: ⁻:	5-1 Farms 40011			
	al Form 106H			
Sche	edule H: Your Cod	ebtors		12/15
people a ill it out our nar 1. D	are filing together, both are equ , and number the entries in the me and case number (if known) Do you have any codebtors? (If	ally responsible for supply boxes on the left. Attach to . Answer every question.	s you may have. Be as complete and ac ying correct information. If more space he Additional Page to this page. On the o not list either spouse as a codebtor.	is needed, copy the Additional Page,
□ Y				
— Y	res			
			perty state or territory? (Community proto Rico, Texas, Washington, and Wiscon	
	No. Go to line 3.			
_	es. Did your spouse, former spou	use, or legal equivalent live	with you at the time?	
	- co. 2.a yea. epeace, .ee. epea	.oo, or logar oquitarent iiro	you at ano anno.	
in li For	ine 2 again as a codebtor only i	f that person is a guaranto	or or cosigner. Make sure you have list	filing with you. List the person shown ted the creditor on Schedule D (Officia e D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor	D.Codo		e creditor to whom you owe the debt
	Name, Number, Street, City, State and ZI	P Code	Check all sch	edules that apply:
3.1	Antwonne Hudson		■ Schedule	D, line 2.4
	1202 Cerasus Drive		☐ Schedule	E/F, line
	Rockford, IL 61108		☐ Schedule	
			Wells Fargo	Home Mortgage
3.2	Antwonne Hudson			D.F. 0.4
0.2	1202 Cerasus Drive			D, line
	Rockford, IL 61108			E/F, line
	,		☐ Schedule Ford Motor	
			Fora wotor	Great
3.3	Antwonne Hudson		■ Schedule	D, line 2.2
	1202 Cerasus Drive		☐ Schedule	E/F, line
	Rockford, IL 61108		☐ Schedule	
			Ford Motor	Credit

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 34 of 60

	in this information to identify your countries to a Andrea S. H								
	btor 2 puse, if filing)				_				
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number nown)		-			☐ A supp	nis is: ended filing plement showin ome as of the f	0 1	
0	fficial Form 106I					MM / [DD/ YYYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment Fill in your employment	ır spouse is not filing w	ith you, do not inclu onal pages, write yo	ude infor	mati	on about you d case numbe	r spouse. If mer (if known). <i>I</i>	ore space is Answer every	needed,
	information.		Debtor 1				otor 2 or non-f Employed	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed				☐ Not employed		
	employers.	Occupation	Branch Manager						
	Include part-time, seasonal, or self-employed work.	Employer's name	Illinois Title Lo	ans					
	Occupation may include student or homemaker, if it applies.	Employer's address	4950 North 2nd Loves Park, IL						
		How long employed t	here? 3 years	S					
Pai	rt 2: Give Details About Mor	nthly Income							
spoi	mate monthly income as of the duse unless you are separated.								
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	on for all	empl	oyers for that _l	person on the I	ines below. If	you need
						For Debtor		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,725	.72 \$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0	.00_ +\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	1,725.7	2 \$	N/A	

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 35 of 60

Debtor 1		Andrea S. Hudson		•	Case	number (if know	vn)				
					For	Debtor 1			Debtor -filing s		
	Сор	y line 4 here	4.		\$_	1,725.7	72	\$		N/A	_
5.	List	all payroll deductions:									
	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a 5b 5c 5d 5e 5f.). ;. l. ;.	\$ \$	316.6 0.0 0.0 0.0 0.0 0.0	00 00 00 00 00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$		N/A N/A N/A N/A N/A N/A	- - - - -
_	5h.	Other deductions. Specify:	_	1.+	\$_			+ \$		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_ -	316.8		\$		N/A	_
7. 8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	7. 8a		\$ _ \$	1,408.9 0.0		\$ \$		N/A	_
	8b.	Interest and dividends	8b		\$-	0.0		\$ —		N/A	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8c 8d 8e	i.	\$_ \$_ \$_	602.3 0.0 0.0	00	\$ \$ \$		N/A N/A N/A	_
		Specify:	_ 8f.		\$_	0.0		\$		N/A	_
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g	J. 1.+	\$_ \$	0.0	00	_ \$		N/A N/A	_
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Г	Ψ_ \$	602.3		\$		N/A	-
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,011.23 +	\$_		N/A	= \$ _	2,011.23
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe						Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	2,011.23
13.	Do y	vou expect an increase or decrease within the year after you file this form? No. Yes Explain:	?							Combi month	ned ly income

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 36 of 60

EII	in this informa	tion to identify	our ogget			1		
		tion to identify yo	our case:					
Deb	tor 1	Andrea S. H	udson			Ch	eck if this is: An amended filing	
	tor 2 ouse, if filing)						A supplement sho	wing postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLI	NOIS		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	nses				12/1
Be info	as complete a	and accurate as	possible eded, atta	If two married people a				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□ N		a copa.					
			st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	ebtor 2.	
2.	Do vou have	e dependents?	□ No					
	Do not list D Debtor 2.	•	■ Yes.	Fill out this information for each dependent	Dependent's relat		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		6	Yes
					Daughter		14	□ No ■ Yes
					Daughter		17	□ No ■ Yes
							_	□ No
_	_							☐ Yes
3.	expenses o	oenses include f people other t d your depende	han 👝	No Yes				
Est exp	imate your ex		our bankr	uptcy filing date unless				apter 13 case to report of the form and fill in the
the		h assistance an		government assistance luded it on <i>Schedule I:</i>			Your exp	enses
4.		or home owners and any rent for th		ses for your residence. r lot.	Include first mortgag	e 4.	\$	1,495.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	· ·	22.92
				ıpkeep expenses		4c.	:	0.00
5		owner's associat		dominium dues our residence, such as h	ome equity loans	4d. 5.	·	0.00

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 37 of 60

Debtor 1 Andrea S. H	udson	Case num	ber (if known)	
. Utilities:				
 Utilities: 6a. Electricity, hea 	it. natural gas	6a.	\$	167.00
•	garbage collection	6b.	\$	49.03
	Il phone, Internet, satellite, and cable services	6c.	·	476.13
6d. Other. Specify:	•	6d.	·	
			·	0.00
		7.	·	500.00
	ren's education costs	8.	\$	0.00
Clothing, laundry, a	•	9.	\$	150.00
. Personal care produ		10.	\$	0.00
. Medical and dental	•	11.	\$	0.00
	ude gas, maintenance, bus or train fare.	12.	\$	150.00
Do not include car pa		13.	·	
	s, recreation, newspapers, magazines, and books		·	50.00
	tions and religious donations	14.	\$	0.00
i. Insurance.	and deducted from the many and the body ded to Proce 4			
	ance deducted from your pay or included in lines 4 or 20.	45-	¢	0.00
15a. Life insurance		15a.	·	0.00
15b. Health insuran		15b.	·	0.00
15c. Vehicle insurar	nce	15c.	*	0.00
15d. Other insurance	· · ·	15d.	\$	0.00
	e taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
. Installment or lease		17-	¢	444.50
17a. Car payments		17a.	·	444.50
17b. Car payments		17b.	·	0.00
17c. Other. Specify:		17c.	·	68.51
17d. Other. Specify:		17d.	\$	0.00
	limony, maintenance, and support that you did not repo		\$	0.00
	rpay on line 5, <i>Schedule I, Your Income</i> (Official Form 1 u make to support others who do not live with you.	1061).	\$	0.00
Specify:	Thake to support others who do not live with you.	19.	Ψ	0.00
	expenses not included in lines 4 or 5 of this form or on		ur Incomo	
20a. Mortgages on		20a.		0.00
			· -	
20b. Real estate tax		20b.	·	0.00
	eowner's, or renter's insurance	20c.		0.00
	repair, and upkeep expenses	20d.		0.00
20e. Homeowner's	association or condominium dues	20e.	\$	0.00
. Other: Specify:		21.	+\$	0.00
Calculate your mon				
22a. Add lines 4 thro			\$	2 572 00
	9	612	\$	3,573.09
	onthly expenses for Debtor 2), if any, from Official Form 100	0J- ∠	· <u> </u>	
22c. Add line 22a and	d 22b. The result is your monthly expenses.		\$	3,573.09
B. Calculate your mon	thly net income.		L	
	your combined monthly income) from Schedule I.	23a.	\$	3,654.95
	onthly expenses from line 22c above.	23b.	·	3,573.09
Lob. Copy your mor	mily experience from time 220 above.	200.		3,373.03
23c. Subtract your r	monthly expenses from your monthly income.			
	our monthly net income.	23c.	\$	81.86
,	•			
	ncrease or decrease in your expenses within the year af			
	pect to finish paying for your car loan within the year or do you expe	ect your mortgage p	payment to increas	e or decrease because o
modification to the terms	s or your mortgage?			
■ No.				
☐ Yes. Exp	olain here:			

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 38 of 60

Fill in this	s information to identify your	case:			
Debtor 1	Andrea S. Hudso				
Debioi i	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106Dec				
		ا معالمات بالمصا	Dalataria Ca	la a alcela a	
Decia	aration About a	<u>in individual</u>	Deptor's Sc	neaules	12/15
ears, or l	both. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Did y	you pay or agree to pay some	eone who is NOT an attor	rney to help you fill out b	ankruptcy forms?	
	No				
_	Yes. Name of person			Attach Bankrur	otcy Petition Preparer's Notice,
Ц					nd Signature (Official Form 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the sum	nmary and schedules filed	d with this declaration a	and
X /	s/ Andrea S. Hudson		X		
	Andrea S. Hudson		Signature of	Debtor 2	
	Signature of Debtor 1		ŭ		
Г	Date June 16, 2017		Date		
	· · · · · · · · · · · · · · · · · · ·				

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 39 of 60

	lin thin inform	ation to identify you				
		ation to identify you				
De	btor 1	Andrea S. Hudso	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
` '						
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
	se number				-	Check if this is an amended filing
St		of Financial	Affairs for Indivic			4/16
info nun	ormation. If months of the control o	ore space is needed,). Answer every que	rital Status and Where You	this form. On the top of any		
	Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	all of the places you I	ved in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	1202 Ceras Rockford,		From-To: 2012 - 1/2017	☐ Same as Debtor	ı	☐ Same as Debtor 1 From-To:
	■ No □ Yes. Mal	es include Arizona, Ca	rer live with a spouse or leg lifornia, Idaho, Louisiana, Nev nedule H: Your Codebtors (Of r Income	vada, New Mexico, Puerto R		
4.	Fill in the total	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part	time activities.	endar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,257.21	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Case 17-81453 Page 40 of 60
Case number (if known) Document

Debtor 1 Andrea S. Hudson

					Debtor 1				Debtor 2		
						of income that apply.		s income e deductions and sions)	Sources of inco		Gross income (before deductions and exclusions)
			dar year: December 3	1, 2016)	■ Wages bonuses,	, commissions, tips		\$41,523.94	☐ Wages, comr bonuses, tips	nissions,	
					☐ Operat	ing a business			☐ Operating a b	ousiness	
			lar year bef December 3		■ Wages	, commissions, tips		\$42,570.42	☐ Wages, comr bonuses, tips	missions,	
					☐ Operat	ing a business			☐ Operating a b	ousiness	
5.	Incluand of winning	de indother plings. I each s	ome regardl oublic benefi f you are filir	ess of wheth t payments; ng a joint cas ne gross inco	er that inco pensions; re e and you h	me is taxable. Exa ental income; intel nave income that y	amples of rest; divid you receive		limony; child suppo ted from lawsuits; r only once under De	oyalties; and btor 1.	ecurity, unemployment, d gambling and lottery
					Debtor 1				Debtor 2		
					Sources of Describe b		each	s income from source e deductions and sions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
			1 of curren iled for ban		Child Su	pport		\$3,614.00			
			dar year: December 3	1, 2016)	Child Su	pport		\$7,228.00			
			lar year bef December 3		Child Su	pport		\$7,228.00			
Par	_	either No.	Debtor 1's Neither De individual p During the 9 No. Yes * Subject to	or Debtor 2' btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include b adjustment	s debts pri ebtor 2 has personal, fa re you filed ach credito editor. Do no payments to on 4/01/19	amily, or househo for bankruptcy, di r to whom you pai ot include paymer o an attorney for ti and every 3 year e primarily consu	r debts? umer debts ld purpos id you par id a total ints for doi his bankr s after the	ots. Consumer debt e." y any creditor a tota of \$6,425* or more i mestic support oblic uptcy case. at for cases filed on	I of \$6,425* or more none or more payr pations, such as chi or after the date of	e? ments and th	nd alimony. Also, do
			□ No. ■ Yes		ach credito ments for de	omestic support o		of \$600 or more and s, such as child sup			creditor. Do not nclude payments to an
	Cre	ditor's	s Name and	Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	ayment for

Official Form 107

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Page 41 of 60
Case number (if known) Document

Debtor 1 Andrea S. Hudson

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Ford Motor Credit PO Box 542000 Omaha, NE 68154	4/2017 - 6/2017	\$1,333.50	\$8,202.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. I alimony.	artners; relatives of any ger a control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general partner; corporations ny managing agent, including one fo
	□ No				
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Maurice Hilton 3039 16th Street Rockford, IL 61109		\$2,249.00	\$2,751.00	Loan Repayment
	■ No □ Yes. List all payments to an insider				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case
	Wells Fargo Bank NA v. Andrea Hudson et al. 2017 CH 452	Foreclosure	Winnebago Co Court 400 W State St Rockford, IL 61	-	■ Pending □ On appeal □ Concluded
	Andrea S. Hudson v. Antwonne Hudson 2015 D 119	Divorce	Winnebago Co Court	unty Circuit	☐ Pending ☐ On appeal

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 42 of 60

Dok	htor 1 Andrea C Hudaan	Document	Page 42 of 60	· (if Immum)	
Dei	Andrea S. Hudson		Case number	(If Known)	
10.	Within 1 year before you filed for bank. Check all that apply and fill in the details I		pperty repossessed, foreclosed	d, garnished, attached	d, seized, or levied?
	No. Go to line 11. Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Propert		Date	Value of the property
		Explain what happer	ned		
11.	Within 90 days before you filed for ban accounts or refuse to make a payment No Yes. Fill in the details.			stitution, set off any a	amounts from your
	Creditor Name and Address	Describe the action t	he creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bank court-appointed receiver, a custodian,		perty in the possession of an	assignee for the bend	efit of creditors, a
	■ No □ Yes				
Par	rt 5: List Certain Gifts and Contribution	ons			
			ifte with a total value of more	than \$600 per person	2
13.	Within 2 years before you filed for ban ■ No □ Yes. Fill in the details for each gift.	kruptcy, did you give any g	ints with a total value of more i	man \$600 per person	<i>?</i>
	Gifts with a total value of more than \$ per person	Describe the gif	ts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift an Address:	nd			
14.	Within 2 years before you filed for ban ■ No	kruptcy, did you give any g	ifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	ĺ	ou contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses				
15.		ruptcy or since you filed fo	r bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and	Describe any insurance	coverage for the loss	Date of your	Value of property
	how the loss occurred		surance has paid. List pending 3 of Schedule A/B: Property.	loss	lost
Par	rt 7: List Certain Payments or Transfe	ers			
16.	Within 1 year before you filed for bank consulted about seeking bankruptcy o Include any attorneys, bankruptcy petition	or preparing a bankruptcy p	etition?		rty to anyone you
	□ No				
	Yes. Fill in the details.				

Person Who Made the Payment, if Not You
Official Form 107 Statem

Address

Person Who Was Paid

Email or website address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

transferred

Description and value of any property

page 4

Amount of

Date payment or transfer was

made

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document

Page 43 of 60 Case number (if known) Debtor 1 Andrea S. Hudson

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	\$14.95			6/8/2017	\$14.95
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$500.00			6/2017	\$500.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you	ors or to make payment			r transfer any prope	erty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	transferred in the ordinary course of your be include both outright transfers and transfers me include gifts and transfers that you have alread No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you	ade as security (such as	the granting of a sent. value of	Describe a	ny property or received or debts	Date transfer was made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pri ■ No □ Yes. Fill in the details.		iny property to a se	elf-settled tru	st or similar device	of which you are a
	Name of trust	Description and	Description and value of the property transferre		ed .	Date Transfer was
		2000	Tanad or and propo	,	-	made
Par	t 8: List of Certain Financial Accounts, In	struments. Safe Depos	sit Boxes, and Stor	age Units		
	<u> </u>	•	·			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso ☐ No	or other financial accou	unts; certificates o			
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer
	PNC Bank 4615 East State Street Rockford, IL 61108	XXXX-	■ Checking □ Savings □ Money Marke □ Brokerage □ Other		017	\$0.00

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 44 of 60 Case number (if known) Debtor 1 Andrea S. Hudson Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred XXXX-**PNC Bank** \$0.00 4/2017 ☐ Checking 4615 East State Street Savings Rockford, IL 61108 ☐ Money Market □ Brokerage Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, Address (Number, Street, City, State and ZIP Code) have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Do you still Name of Storage Facility Who else has or had access Describe the contents Address (Number, Street, City, State and ZIP Code) have it? to it? Address (Number, Street, City, State and ZIP Code) Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- - No

Yes. Fill in the details.

Owner's Name Where is the property? Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Code)

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

- 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

Yes. Fill in the details. п

Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 45 of 60

Del	otor 1 Andrea S. Hudson		Case number (if known)				
25.	Have you notified any governmental unit of any release of hazardous material?						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adr	ninistrative proceeding under any enviro	onmental law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pai	t 11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to any	/ business?			
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity, e	either full-time or part-time				
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnership	(LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing ex	ecutive of a corporation					
	☐ An owner of at least 5% of the votin	q or equity securities of a corporation					
	■ No. None of the above applies. Go to I	Part 12					
		in the details below for each business.					
	Business Name	Describe the nature of the business	Employer Identification number	r			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security				
	(,, , ,	Name of accountant of bookkeeper	Dates business existed				
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? Inclu	ude all financial			
	■ No □ Yes. Fill in the details below.						
	Name Address	Date Issued					
	(Number, Street, City, State and ZIP Code)						
Pai	t 12: Sign Below						
are with	ve read the answers on this <i>Statement of Fir</i> true and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, o	r obtaining money or property by fra				
	Andrea S. Hudson						
	drea S. Hudson nature of Debtor 1	Signature of Debtor 2					
Dat	June 16, 2017	Date					
Did ■ N		ent of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 10	07)?			
Did ■ N	you pay or agree to pay someone who is not	t an attorney to help you fill out bankrup	tcy forms?				
	es. Name of Person . Attach the Bankru	ptcy Petition Preparer's Notice, Declaration	n, and Signature (Official Form 119).				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Page 46 of 60 Case number (if known) Document

Debtor 1 Andrea S. Hudson

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 47 of 60

Debtor 1	Andrea S. Hudson			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is an
				amended filing
Official For	m 108			
		for Individu	als Filing Under Chapte	or 7
Statemen	t of intention	101 IIIuIviuu	als Filling Under Chapte	er / 12/15
If you are an indiv	dual filing under chapte	er 7, you must fill out th	nis form if:	
-	claims secured by your			
	d personal property and		ired.	
			e your bankruptcy petition or by the date s	
on the fo		court extends the time	for cause. You must also send copies to the	ne creditors and lessors you list
If two married noo	nlo are filing together in	a a joint case both are	equally responsible for supplying correct i	information Both dobtors must
	date the form.	i a joint case, both are	equally responsible for supplying correct i	miormation. Both deptors must
Re as complete ar	id accurate as nossible	If more snace is need	ed, attach a separate sheet to this form. On	the top of any additional pages
	ir name and case numb		su, attach a separate sheet to this form. On	The top of any additional pages,
Dort 4. Liet Vo.	un Cun ditaun Milan I Inva C	Saarraad Olaimaa		
Part 1: List You	r Creditors Who Have S	secured Claims		
For any creditor information below		1 of Schedule D: Cred	itors Who Have Claims Secured by Propert	ty (Official Form 106D), fill in the
	itor and the property that	t is collateral Wha	at do you intend to do with the property tha	at Did you claim the property
		seci	ures a debt?	as exempt on Schedule C?
Creditor's Fo	rd Motor Credit	= 9	Surrender the property.	■ No
name:			Retain the property and redeem it.	_
Description of	2042 Ford Fusion		Retain the property and enter into a	☐ Yes
Description of property	2012 Ford Fusion		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:		Δ.	etain the property and [explain].	
Craditaria F-	ad Marian One dir			
	rd Motor Credit		Surrender the property.	□ No
Creditor's Fo name:	rd Motor Credit		Retain the property and redeem it.	□ No ■ Yes
name:	rd Motor Credit 2013 Ford Explorer	□ F ■ F		
name: Description of property		□ F	Retain the property and redeem it. Retain the property and enter into a	
name: Description of		□ F	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	
name: Description of property		□ F	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	
name: Description of property securing debt:		□ F	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	
name: Description of property securing debt:	2013 Ford Explorer		Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	■ Yes — No
name: Description of property securing debt: Creditor's On name:	2013 Ford Explorer		Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a	■ Yes
name: Description of property securing debt: Creditor's On name:	2013 Ford Explorer	□ F □ F □ F □ F □ F	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it.	■ Yes — No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Fill in this information to identify your case:

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 48 of 60

Del	otor 1 Andrea S. Hudson	Case number (if known)	
s	ecuring debt:		-
r C p	Creditor's Wells Fargo Home Mortgage name: Description of 1202 Cerasus Drive Rockford, IL property 61108 Winnebago County	■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ No □ Yes
Par For in th	t2: List Your Unexpired Personal Property Leases any unexpired personal property lease that you listed the information below. Do not list real estate leases. Unimay assume an unexpired personal property lease if the second property lease if the second property lease.	expired leases are leases that are still in effect; the	lease period has not yet ended.
Des	scribe your unexpired personal property leases		Will the lease be assumed?
Des	sor's name: scription of leased perty:		□ No
Des	sor's name: scription of leased		□ No
	perty: sor's name:		□ Yes
	scription of leased perty:		☐ Yes
Des	sor's name: scription of leased perty:		□ No □ Yes
Des	sor's name: scription of leased perty:		□ No
Des	sor's name: scription of leased perty:		□ No
Les	sor's name:		□ No
	perty:		☐ Yes
Und	t 3: Sign Below er penalty of perjury, I declare that I have indicated my perty that is subject to an unexpired lease.	r intention about any property of my estate that sec	ures a debt and any personal
X	/s/ Andrea S. Hudson Andrea S. Hudson Signature of Debtor 1	Signature of Debtor 2	
	Date June 16, 2017	Date	

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 53 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Andrea S. Hudson		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DE	BTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy	, or agreed to be paid t	o me, for services rendered or	to
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have received.		\$	500.00	
	Balance Due		\$	0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are memb	ers and associates of my law fi	rm.
[I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.				1
5. I	n return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy ca	se, including:	
b c	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, stat Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	ement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	n may be required; nd any adjourned hear. emption planning;	ings thereof;	
6. B	y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	e does not include the following schargeability actions, jud	g service: icial lien avoidance	s, relief from stay actions	or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an akruptcy proceeding.	y agreement or arrangement for	r payment to me for re	presentation of the debtor(s) in	
Ju	ne 16, 2017	/s/ Daniel A. Spri	nger		
Da	te	Daniel A. Spring Signature of Attorno Springer Law Fir 2222 E State St Suite 107 Rockford, IL 611	er ey m		
		815.312.4725			
		dspringerlaw@g	mail.com		

Filed 06/16/17 Document

Entered 06/16/17 14:05:40 Page 54 of 60 Desc Main

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not
 include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
 Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
 information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed. I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 6/15/17	
Signature: Andrea Hudson Attorney Signature:	
Print Name: Andreathuson Attorney Print: Das print:	

United States Bankruptcy CourtNorthern District of Illinois

In re	Andrea S. Hudson		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR N	MATRIX	
		Number o	f Creditors:	42
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of cred	itors is true and correct to	the best of my
Date:	June 16, 2017	/s/ Andrea S. Hudson Andrea S. Hudson		

Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097

Amsher Collection Services 4524 Southlake Parkway 15 Birmingham, AL 35244

Antwonne Hudson 1202 Cerasus Drive Rockford, IL 61108

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

CEPAmerica Illinois LLP PO Box 582663 Modesto, CA 95358-0046

Citimortgage Attn: Bankruptcy Dept. PO Box 6243 Sioux Falls, SD 57117

Comenity Bank Attn: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218

Comenity Bank PO Box 182120 Columbus, OH 43218

Comenity Bank/Bergners PO Box 182789 Columbus, OH 43218

Comenity Bank/Victorias Secret PO Box 182789 Columbus, OH 43218

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602

Credit First Natl Assoc Attn: Bankruptcy Dept. PO Box 81315 Cleveland, OH 44181-0315

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

Crusader Clinic Attn: Bankruptcy Dept. 1100 Broadway Rockford, IL 61104

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Exxon/Mobil/CBNA Attn: Bankruptcy Dept. PO Box 6497 Sioux Falls, SD 57117

Federal Loan Servicing Credit Attn: Bankruptcy Dept. PO Box 60610 Harrisburg, PA 17106

Ford Motor Credit PO Box 542000 Omaha, NE 68154

Freedman, Anselmo, Lindberg LLC 1771 West Diehl Road, Suite 150 Naperville, IL 60563

GreenSky PO Box 29429 Atlanta, GA 30329 MACYS Attn: Bankruptcy Dept. PO Box 8218 Mason, OH 45040

Maurice Hilton 3039 16th Street Rockford, IL 61109

Mercy Health System 1000 Mineral Point Avenue Janesville, WI 53548

OneMain PO Box 1010 Evansville, IN 47706

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Pay Pal Credit/Bill Me Later PO Box 5138 Lutherville Timonium, MD 21094

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rockford Pediatric Pulmonology 7144 Kleckner Road Rockford, IL 61107

Sears/CBNA Attn: Bankruptcy Dept. PO Box 6282 Sioux Falls, SD 57117

Sprint KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251 Stanislaus Credit Control Services, 914 14th Street P.O. Box 480 Modesto, CA 95353

Suntrust 1797 NE Executive Park Lane Atlanta, GA 30329

SYNCB/JC Penney Attn: Bankruptcy Dept. PO Box 965007 Orlando, FL 32896

SYNCB/Old Navy DC PO BOX 965005 Orlando, FL 32896

Syncb/Sams Club PO Box 965005 Orlando, FL 32896

SYNCB/Wal-Mart Attn: Bankruptcy Dept. PO Box 965024 Orlando, FL 32896

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015-3410

TD Bank USA/Target Credit Attn: Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440

The Room Place Attn: Bankruptcy Dept. 7340 E State St, Rockford Rockford, IL 61108

US Cellular Attn: Bankruptcy Dept. 8410 W. Bryn Mawr Chicago, IL 60631

Case 17-81453 Doc 1 Filed 06/16/17 Entered 06/16/17 14:05:40 Desc Main Document Page 60 of 60

Wells Fargo Home Mortgage Attn: Bankruptcy Dept. PO Box 10335 Des Moines, IA 50306

Winnebago County Circuit Court 400 W State St 2017 CH 452 Rockford, IL 61101